

**NOTICE OF CANCELLATION**

**From Student Employment and College Work-Study Programs**

IMPORTANT: This form must be sent to the Financial Aid Office before another student may be assigned to work in your Department.

TO: Justina Jones, Student Employment Coordinator Office of Financial Aid,

Lee Hall, Room 228

FROM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Supervisor and Department

Name and Banner ID# of Student Employee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for cancellation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last day worked: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **Separation Checklist** | | |
|  | Complete | N/A |
| 1. Return to supervisor any keys, other items, and equipment that were issued by the university. |  |  |
| 1. Return to supervisor any keys, other items, and equipment that were issued by the university. |  |  |
| 1. Provide a current permanent home address to the Office of Financial Aid and the Payroll Office. W-2s will be mailed to this address during January of the following year. |  |  |
| 1. Signed off on Employees Timecard on MyTime. |  |  |
| Comments: | | |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor’s signature